TRA	NSMITTA	Docket No. 00990096AA									
In Re Application Of: Falaki et al											
Application No.		Filing Date	Examiner	Customer No.	Group Art Unit	Confirmation No.					
	597,647	07/19/2007	n/a	30743	2617	4348					
Title: SYSTEM AND METHOD FOR NETWORK HANDOVER											
Address to:  Commissioner for Patents  P.O. Box 1450  Alexandria, VA 22313-1450											
			37 CFR 1.97(b)								
1. 🛚	The Information Disclosure Statement submitted herewith is being filed within three months of the filing of a national application other than a continued prosecution application under 37 CFR 1.53(d); within three months of the date of entry of the national stage as set forth in 37 CFR 1.491 in an international application; before the mailing of a first Office Action on the merits, or before the mailing of a first Office Action after the filing of a request for continued examination under 37 CFR 1.114.										
2.	37 CFR 1.97(c)  The Information Disclosure Statement submitted herewith is being filed after the period specified in 37 CFR 1.97(b), provided that the Information Disclosure Statement is filed before the mailing date of a Final Action under 37 CFR 1.113, a Notice of Allowance under 37 CFR 1.311, or an Action that otherwise closes prosecution in the application, and is accompanied by one of:										
☐ the statement specified in 37 CFR 1.97(e);											
OR											
	☐ the fe	ee set forth in 37 CF	R 1.17(p).								

TRANSMITTA	Docket No. 00990096AA										
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Payment of Fee  (Only complete if Applicant elects to pay the fee set forth in 37 CFR 1.17(p))											
□ A check in the amount of is attached.  □ The Director is hereby authorized to charge and credit Deposit Account No. as described below. □ Charge the amount of □ Credit any overpayment. □ Charge any additional fee required. □ Payment by credit card. Form PTO-2038 is attached.  WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.  Certificate of Transmission by Facsimile*  □ Certificate of Transmission by Facsimile* □ I certify that this document and authorization to charge deposit account is being facsimile transmitted to the United States Patent and Trademark Office (Fa □ (Date) □ (Date) □ Charge the amount of Deposit Account No. 50-2041 □ Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.  Certificate of Mailing by First Class Mail □ I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on (Date)											
	Signature			Signature of Pers	on Mailing Correspo	ndence					
Typed or P	rinted Name of Person Sign	ning Certificate	Туре	d or Printed Name	of Person Mailing Ce	rtificate					
Michael E. Reg. No. 32 Whitham, C	Signature  Whitham 2,635 Curtis, Christofferson & Cool et Hills Road, Suite 340 ginia 20190		Dated: (	P810412	.009						

cc: